

To the Hulliford Urban Sanitary Authority
Gentlemen

They demand you my report for the year ending 1897. Table Wannexed gives the Deaths from all causes viz. 120 a higher than usual. This is to be accounted for in the following manner, in the first quarter of the year many old people died and in the last many children 45 deaths occurred under 5 years of age during the year; the deaths from Measles were 9 from Whooping Cough 8 all in children with the exception of two all under 2 years of age. There was one death from membranous Croup, & no deaths from any other notified disease.

Table B annexed gives the number of births 159 during the year. 10 cases have been notified under the Act: viz 5 of Scarlet fever - 4 of these were removed to the Infectious Fever Hospital, thus stopping the infection from spreading as they all broke out at different dates. The other case was privately isolated.

The Case of enteric fever occurred in a badly constructed house which has since been altered. The case was removed to the Isolation Hospital and by this means recovery was obtained. 3 cases of Septicæmia occurred. This was caused in one case by a gully being made inside a house; this case was removed to the Isolation Hospital with

satisfactory results. The other notified cases were *Cysticercus*.

I think it would be well if the Council were to pray to have any cases of diphteria reported bacteriologically examined: If this were done I could tell the medical practitioners if it were a real case or not - besides which it would be a great advantage to the public to know the exact state of the case. It is now being done by several sanitary authorities. I could get it done by the Clinical Research Society for a small fee. I think the public should have the advantage of the advance in sanitary medical knowledge and it puts the Sanitary Committee in a strong position to order any sanitary affects to be put right.

There has been an epidemic of measles and whooping cough during the last quarter of the year, but to what extent I am unable to inform you as they are not under the notification act.

Water supply. Although we have had another draught the drinking water has been plentiful. The extension to the Northgate has been successfully carried out.

River watch. During the year many of the inhabitants in the higher parts of the town have been much inconvenienced by an insufficient supply. Luckily no illness has resulted therefrom.

and the town must congratulate itself
on this immunity from sickness.
Shoos before the dry weather commences
the new drain which you have ordered
and which I advocated last year will
be laid and thus put an end to this
long standing grievance.

Cantrey Brook. This is still in a disgusting
condition & the Council could afford
to spend a sum of £800 on septic tanks
it would entirely remove this nuisance
at Redlet and elsewhere sewage ^{is being} treated
successfully by this method.

Over crowding. Not much exists now
at the same time more cottages are needed.
Workshops have been visited and found
in order.

The scavenging of this town has been done in
a very unsatisfactory manner. In the
first place the carts remove a lot of trade
refuse when they ought to be doing their
proper work. This work ought not to be done
at all by these carts. Secondly, one horse
is not enough to get round the town frequently
and a number of houses are left too long.
This matter should have your sincere attention
above. I should like to ask that every
dust bin be done away with and each
house be required to keep a proper ash pit
which could be emptied periodically. By
this means the work could be done quicker
and with less manual labour. The smell
which arises when the pits are emptied
would be done away with. At the present

time the ash bin is the receptacle for all kinds of filth and a constant source of quarrelling between neighbours.

During the year the Inspector of Insurance has issued 9 legal notices for abatement of insurance, but this is only done as an extreme measure. As a rule when people are asked to abate one, they do so willingly and much credit is due to the Inspector for getting an amount of work done in such an imitative manner.

During the year the Inspector has paid attention to the rural portion of the Borough. All the notices have not yet been properly complied with and will require your further order



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(B) TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the year 1897, in the Bridgwater District; classified according to Diseases, Acts and Towns.

POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the year 1897, in the Bridgwater District; classified according to

State here whether "Notification of Infectious Disease" is compulsory in the District. If blank headings the names of any that are notifiable in the District, and fill the columns accordingly such Hospital is situated; and if not within the District, state where it is situated

Since when? 1-1st Aug
State here the name of the Isolation

Besides the above-mentioned Diseases, insert in the columns with
used by the sick of the District. Mark (H) the Locality in which

NOTES ON TABLE B.

(See also Notes on back of Table A.)

- NOTE 1. The present *Table B.* is concerned with population, births, and sickness (not with mortality) in the district or division to which the Table relates.
2. As stated in the heading of Col. (a), *Public Institutions* should be regarded as separate localities, and the new cases of sickness in them should be separately recorded. Workhouses, Hospitals, Infirmaries, Asylums, and other establishments into which numbers of people, and especially of sick people, are received, are Public Institutions for the purpose of these statistics.
3. *Comments on any unequal incidence of notifiable disease upon the several localities, and considerations as to the local incidence of Consumption and other prevalent diseases, should be made in the text of the Report.*

TABLE OF DEATHS
during

in the
Brake Rock

for
District,

The subjoined numbers have also to be taken into account in judging of the above records of mortality.

See Note 5 on

Deaths occurring outside the district among persons belonging thereto.

* The heading of column 19 is left blank for the insertion of Influenza, or any other disease which it may be thought desirable to record.

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NOTES ON TABLES A AND B.

NOTE 1. *Medical Officers of Health of "Combined Districts" must make a separate Return for the District of each District Council.*

2. *Medical Officers of Health acting for a portion only of the District of a District Council should write, in the heading of the Table, the designation of the Division for which they act.*
3. *The words "Urban," "Rural," or "Metropolitan" must be inserted in the appropriate space in the heading, according as the District is Urban or Rural, or is within the Metropolitan Area.*
4. The "Localities" adopted for the purpose of these statistics should be areas of known population; such as parishes, groups of parishes, townships or wards.

As stated at the head of the first column in each Table, *Public Institutions* should be regarded as separate localities, and the deaths in them should be separately recorded. Workhouses, Hospitals, Infirmaries, Asylums, and other establishments into which numbers of people, and especially of sick people, are received are Public Institutions for the purpose of these statistics.

5. *The deaths which have to be classified in this Table (A), and summed up in the horizontal line of "Totals," are the whole of those registered as having actually occurred in the several localities comprised within the Division or District. But the registered number of deaths frequently requires correction before it can give an exact view of the mortality of a Division or District; and the two lowest horizontal lines are provided for the purpose of enabling Medical Officers of Health to indicate, to the best of their ability, what the extent of such corrections should be. Details concerning the corrective figures, e.g., the institutions that have been considered, or the particular localities to which corrections apply, may appear in the text of the report or in supplementary tables.*

Area and Population of the District or Division to which this Return relates.							
Area in Acres	<u>2987</u>						
Population (Last Census)	<u>5865</u>						
" (Estimated to middle of 1897)	<u>5900</u>						
Death Rates.	<table border="0"> <tr> <td style="vertical-align: bottom;">General</td> <td><u>20</u></td> <td style="vertical-align: bottom;">per 1,000 Population, estimated to middle of 1897.</td> </tr> <tr> <td style="vertical-align: bottom;">Infant (under one year of age)</td> <td><u>5.2</u></td> <td style="vertical-align: bottom;">per 1,000 Births Registered.</td> </tr> </table>	General	<u>20</u>	per 1,000 Population, estimated to middle of 1897.	Infant (under one year of age)	<u>5.2</u>	per 1,000 Births Registered.
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Infant (under one year of age)	<u>5.2</u>	per 1,000 Births Registered.					

In recording the facts under the various headings of Tables A and B, attention has been given to the notes endorsed on the Tables.

W. B. M.

Medical Officer of Health.

(Date)

Feb 9

, 1898.